

FEC FORM 2
STATEMENT OF CANDIDACY

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| | | | |
|------------------------------------------------------------------|----------------------------|---------------------------------------------------------------------------------|-------------------------------------------------------|
| 1. (a) Name of Candidate (in full) Dan Sullivan | | | |
| (b) Address (number and street) 3705 Arctic Boulevard #447 | | <input type="checkbox"/> Check if address changed | 2. Candidate's FEC Identification Number S4AK00214 |
| (c) City, State, and ZIP Code Anchorage AK 99503-5774 | | 3. Is This Statement New (N) OR Amended (A) <input checked="" type="checkbox"/> | |
| 4. Party Affiliation Republican | 5. Office Sought Senate | 6. State & District of Candidate AK 00 | |

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

| | |
|-----------------------------------------------------------|--|
| (a) Name of Committee (in full) Sullivan for US Senate | |
| (b) Address (number and street) 3705 Arctic Blvd #447 | |
| (c) City, State, and ZIP Code Anchorage AK 99503-5774 | |

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

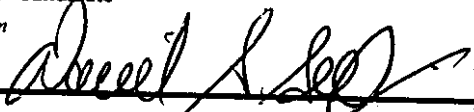
(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

| | |
|------------------------------------------------------------------------|--|
| (a) Name of Committee (in full) New Senate Majority 2014 (NSM 2014) | |
| (b) Address (number and street) 901 N WASHINGTON ST SUITE 700 | |
| (c) City, State, and ZIP Code Alexandria VA 22314-1535 | |

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

| | |
|-------------------------------------------------------------------------------------------------------------------------------|--------------------|
| Signature of Candidate Dan Sullivan  | Date 09/30/2014 |
|-------------------------------------------------------------------------------------------------------------------------------|--------------------|

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
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FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

Page 2 / 5

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

FOUNDERS SENATE CANDIDATE COMMITTEE

(b) Address (number and street)

228 S WASHINGTON STREET SUITE 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Cassidy Perdue Sullivan Tillis Victory Fund (CPST Victory Fund)

(b) Address (number and street)

901 N WASHINGTON ST SUITE 700

(c) City, State and ZIP Code

ALEXANDRIA

VA

22314

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

FLORIDIANS FOR A SENATE MAJORITY

(b) Address (number and street)

228 S WASHINGTON ST STE 115

(c) City, State and ZIP Code

ALEXANDRIA

VA

22314

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FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

Page 3 / 5

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Legacy Victory Committee 2014

(b) Address (number and street)

901 N Washington St., Ste 700

(c) City, State and ZIP Code

Alexandria

VA

22314-1535

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Friends for an American Majority

(b) Address (number and street)

228 S. Washington Street
Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

SULLIVAN VICTORY COMMITTEE

(b) Address (number and street)

228 S WASHINGTON STREET SUITE 115

(c) City, State and ZIP Code

ALEXANDRIA

VA

22314

14020741138

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

Page 4 / 5

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

VICTORY TRUST 2014

(b) Address (number and street)

228 S WASHINGTON STREET SUITE 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

MCFADDEN ERNST COTTON SULLIVAN VICTORY FUND (MECS VICTORY FUND)

(b) Address (number and street)

901 N WASHINGTON ST SUITE 700

(c) City, State and ZIP Code

ALEXANDRIA

VA

22314

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Gardner Daines Sullivan Victory Fund

(b) Address (number and street)

901 N Washington Street
Suite 700

(c) City, State and ZIP Code

Alexandria

VA

22314-1535

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FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

Page 5 / 5

DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ADDITIONAL]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

GARDNER SULLIVAN VICTORY

(b) Address (number and street)

228 S WASHINGTON ST STE 115

(c) City, State and ZIP Code

ALEXANDRIA

VA

22314

DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ADDITIONAL]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code

DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ADDITIONAL]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code

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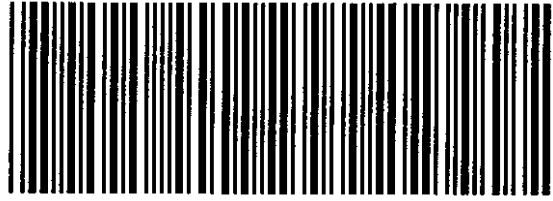
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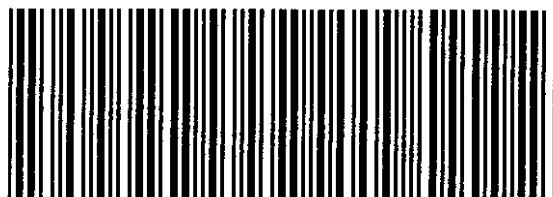
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